



City of Seattle  
Department of Planning and Development

Mailing Address: 700 5th Ave, Suite 2000, PO Box 34019, Seattle, WA 98124-4019  
Phone: (206) 684-8464 Fax: (206) 684-8113  
Website: www.seattle.gov/dpd Hours: M, W, F: 7:30-5:30 T, Th: 10:30-5:30

PERMIT APPLICATION

Sign/Billboard/  
Awning

Work Site Address: \_\_\_\_\_ Zip: \_\_\_\_\_

Work Activity Location: \_\_\_\_\_ Apt/Suite: \_\_\_\_\_

Occupancy: ☐ Single Family ☐ Multi-Family ☐ Commercial ☐ Institutional ☐ Industrial

Description of Work: \_\_\_\_\_

WORK SITE OWNER/TENANT INFORMATION	CONTRACTOR / INSTALLER INFORMATION
<input type="checkbox"/> Owner <input type="checkbox"/> Tenant  Name: _____  Phone: (_____) _____ Fax: (_____) _____  Address: _____ Apt/Ste: _____ City/State: _____ Zip: _____	State License #: _____  City of Seattle Bus Lic #: _____  Company Name: _____  Contact Name: _____  Phone: (_____) _____ Fax: (_____) _____  Address: _____ Apt/Ste: _____ City/State: _____ Zip: _____
Zone: _____ Protected Districts and Landmarks Approval #: _____ Street Use Permit #: _____ # of Branch Circuits: _____ <input type="checkbox"/> Shoreline	
<b>Installations Based on Valuation</b> <small>(Include labor and materials whether or not furnished by installer, furnishings and equipment provided by the owner)</small>	
<input type="checkbox"/> Awning/Canopy Structure (1) <input type="checkbox"/> Border Tubing (2) <input type="checkbox"/> Owner's Value (1 & 2): \$ _____	
<b>Installations Based on Sign Area</b>	
Sign #1: <input type="checkbox"/> Awning <input type="checkbox"/> Canopy <input type="checkbox"/> Directional <input type="checkbox"/> Ground <input type="checkbox"/> Pole <input type="checkbox"/> Projecting <input type="checkbox"/> Wall <input type="checkbox"/> Painted Wall Sign <input type="checkbox"/> Interior Sign <input type="checkbox"/> Under Canopy <input type="checkbox"/> Roof Sign Area: _____ Square feet Structure #: _____ Illuminated: <input type="checkbox"/> Yes <input type="checkbox"/> No	
Sign #2: <input type="checkbox"/> Awning <input type="checkbox"/> Canopy <input type="checkbox"/> Directional <input type="checkbox"/> Ground <input type="checkbox"/> Pole <input type="checkbox"/> Projecting <input type="checkbox"/> Wall <input type="checkbox"/> Painted Wall Sign <input type="checkbox"/> Interior Sign <input type="checkbox"/> Under Canopy <input type="checkbox"/> Roof Sign Area: _____ Square feet Structure #: _____ Illuminated: <input type="checkbox"/> Yes <input type="checkbox"/> No	
Sign #3: <input type="checkbox"/> Awning <input type="checkbox"/> Canopy <input type="checkbox"/> Directional <input type="checkbox"/> Ground <input type="checkbox"/> Pole <input type="checkbox"/> Projecting <input type="checkbox"/> Wall <input type="checkbox"/> Painted Wall Sign <input type="checkbox"/> Interior Sign <input type="checkbox"/> Under Canopy <input type="checkbox"/> Roof Sign Area: _____ Square feet Structure #: _____ Illuminated: <input type="checkbox"/> Yes <input type="checkbox"/> No	
<b>Off-Premises Advertising Sign Information</b>	
Action Type: <input type="checkbox"/> Alteration <input type="checkbox"/> Demolition <input type="checkbox"/> New <input type="checkbox"/> Billboard Registration #: _____ Related MUP #: _____	



The Revised Code of Washington (R.C.W.19.28) and the City of Seattle Electrical Code requires all individuals or entities (other than the property owner) engaged in the business of the installation of electrical wiring to have a valid Washington State Electrical Contractors license.

I certify that the work to be performed under this application will be done in conformance with the City of Seattle Municipal Code.

Signature: \_\_\_\_\_ Date of Application: \_\_\_\_\_

Contractor or Owner (or Authorized Agent)

PAYMENT & MAILING INSTRUCTIONS:

- ☐ Pay by Check Mail checks to: DPD, P.O. Box 34234, Seattle, WA 98124-1234  
☐ Charge my escrow (ADA) account # \_\_\_\_\_  
☐ Call me at (\_\_\_\_\_) \_\_\_\_\_ for a credit card number  
 Choose one of the following options: ☐ Mail Permit ☐ Mail & Fax Permit  
☐ Hold Permit for Pick-Up ☐ Mail & Email Permit to: \_\_\_\_\_

DPD USE ONLY:

Permit #: \_\_\_\_\_

Permit Fee: \_\_\_\_\_